FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS

DOCUMENT # P93000035017 (1) 1. Corporation Name DELIVERY SYSTEMS PLUS, INC. Principal Place of Business 704 MALDANADO PENSACOLA BEACH FL 32561 Mailing Address P.O. BOX 221 COVINGTON LA 70434						<u> </u>	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal F	Place of Busin	ness	2a. Ma	ailing Address			05/14/1993 4. FEI Number	A	Applied For
Suite, Apt. W. etc. 22 City & State 23			26	26 Surie, Apt. #, etc. 27 City & State 28			59-3188776	N	lot Applicable
			├ ─¬				5 Certificate of Status Desired \$8.7		75 Additional e Required
			<u>}</u> 1				Election Campaign Financing Trust Fund Contribution Added to Fees		
Zip 24		Country 25	Z19	p	Count	lry	8. This corporation owes or has paid the cu	urrent year In	
	g, Name	and Address of Cui		ed Agent	1001		10. Name and Address of New Registered		
W	ASSEY, SHA	VRRON B		× <u>-</u>		1 Name	Name		
704 MALDANADO						2 Street Add	et Address (P.O. Box Number is Not Acceptable)		
PE	INSACOLA I	BEACH FL 32561				.1	COS (1.0. DON HORIDON IS NOT NOCOPLADIC)		
					8	3			
									<u> </u>
_	to the provis registered ag am familiar wi	ions of Sections 607.0 prit, or both, in the SI th, and accept the ob	0502 and 607.1 late of Florida oligations of, Sc	1508, Florida Stat Such change wa ection 607.0505, i		City ve-named corby the corporates.	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate the submits that the purpose of the submits that the submits the submits that the submits the submits that the sub	L ' '	Code its registered s registered
SIGNATURE 12. TITLE	Signature, lysect	or printed rain a plinegistered OFFICERS		(N) (okta)okę	ottes, the abos authorized I Florida Statute OTE Registered A 13.	ove-named cor by the corpora es.		of changing pointment as	its registered s registered
SIGNATURE	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plujablo (N PRS	OTE Registered A 13. 1.1 TILE	ove-named cor by the corpora es.	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as	its registered s registered RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSEY	OFFICERS 7, GEORGE H JR	1 agent and title if an	plo:atdo (N PRS DELETE	uries, the aboo s authorized I Florida Statute OIE Registered A 13. 1.1 TILE 1.2 NAMI 1.3 STRE 1.4 CITY	ove-named corpora os. Agent signature requires E E E E T ADDRESS -ST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing oppointment as	its registered s registered RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP THLE	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plujablo (N PRS	uries, the aboo s authorized I Florida Statute OIE Registered A 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY. 2.1 TITLE	ove-named corpora os. OpenI signature require E E E ET ADDRESS -SI-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as	its registered s registered RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plo:atdo (N PRS DELETE	uries, the aboo s authorized In Florida Statute OTE Registered A 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY. 2.1 TITLE 2.2 NAME 2.4 NAME 3.4 NAME 3.5 NAME 3.5 NAME 3.5 NAME 3.6 NAME 3.7 NAME 3	ove-named corpora os. Ogent signature require E E E E E T ADDRESS -ST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing oppointment as	its registered s registered RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plo:atdo (N PRS DELETE	uries, the aboo s authorized In Florida Statute OIE Registered A 13. 1.1 TILLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE	ove-named corpora os. Quent signature requ E E E E E T ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing oppointment as	its registered s registered RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plo:atdo (N PRS DELETE	uries, the aboo s authorized In Florida Statute OIE Registered A 13. 1.1 TILLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE	ove-named corpora os. Agent signature require E E E E E E E T ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing oppointment as	its registered s registered RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N ORS DELETE	uries, the aboo s authorized I Florida Statute OIE Registered A 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY	ove-named corpora os. Agent signature require E E E E E E T ADDRESS -ST-ZIP E E E E E E T ADDRESS (-ST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as	its registered s registered RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N ORS DELETE	Lutes, the aboo s authorized In Florida Statute OIE Registered A 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.2 NAME	ove-named corpora os. Agent signature require E E E E E E T ADDRESS -ST-ZIP E E E E E E T ADDRESS (-ST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as	its registered s registered RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	pletable (N SPRS DELETE DELETE DELETE	LUIES, the aboo s authorized I Florida Statute 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2 1 TITLE 2 NAME 2 3 STRE 2 4 CITY 3.1 TITLE 3 2 NAME 3 3 STREE 3 4 CITY	ove-named corpora os. Agent signature require E E E E E E E T ADDRESS (-S1-ZIP) E E E E E T ADDRESS (-S1-ZIP) E E E E E E T ADDRESS (-S1-ZIP)	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as ND DIRECTO Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N ORS DELETE	uries, the aboo s authorized In Florida Statution In International Inter	ove-named corpora os. Igent signature require EET ADDRESS -ST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as	its registered s registered RS IN 12 Addition
SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	pletable (N SPRS DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statute 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAMI 4.2 NAMI 4.2 NAMI 4.3 STREI 4.2 NAMI 4.3 STREI 4.2 NAMI 4.3 STREI 4.2 NAMI 4.3 NA	ove-named corpora os. Igent signature require EET ADDRESS -ST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as ND DIRECTO Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	pletable (N SPRS DELETE DELETE DELETE	UIES, the aboo sauthorized In Florida Statution In Interest In Interest Int	Agent signature requirements of the corporation of	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as ND DIRECTO Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N PRS DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statute 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STREI 4.2 NAMI 4.3 STREI 4.4 CITY	Dive-named corpora os. Agent signature require E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing appointment as ND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	pletable (N SPRS DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statute 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STREI 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STREI 4.4 CITY 5.1 TITLE 5.1 TITLE	ove-named corpora os. Agent signature require E E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing pointment as ND DIRECTO Change	RS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N PRS DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statution In International Intern	ove-named corpora os. Agent signature require E E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing appointment as ND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N PRS DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statution In International Intern	we-named corpora os. Agent signature require EE ADDRESS -ST-ZIP EE ADDRESSST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP EET ADDRESSST-ZIP	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing appointment as ND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	plecable (N PRS DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statution In International Intern	Dive-named corpora os. Agent signature require E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing appointment as ND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	DELETE DELETE DELETE DELETE	LUIES, the aboo sauthorized I Florida Statution of	we-named corpora os. Igent signature requ E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing appointment as ND DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D MASSEY	or printed rained of registered OFFICERS Y, GEORGE H JR NS DR	1 agent and title if an	DELETE DELETE DELETE DELETE	LUIES, the aboo sauthorized In Florida Statution In International Intern	we-named corpora os. Igent signature requ E E E E E E E E E E E E E E E E E E	poration submits this statement for the purpose of ation's board of directors. I hereby accept the appared when reinstating) DATE	of changing appointment as ND DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition

officer or director of the corporation or the receiver or trustry em Block 12 or Block 13 if changed, or on the attendent pixture of the structure of the struc wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in